FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response . . .

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, MAY **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTIGINANCIAL

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Prefix	-	Serial				
DATE RECEIVED						
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Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Series A Preferred Stock and the Common Stock issuable upon conversion thereof.	
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	04029892
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Pivotal Systems Corporation	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1580 Lawrence Road, Danville, CA 94506	(925) 736-0222
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	Same as above
Same as above	
Brief Description of Business	A Comment of the comm
Software	
Type of Business Organization	MAN + H 2000
	ther (please specify): MAT [4 (114)
□ business trust □ limited partnership, to be formed	
Month Year	
Actual or Estimated Date of Incorporation or Organization: 1 0 0 3	Actual Estimated 181 gick
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	E

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Monkowski, Joseph R. Business or Residence Address (Number and Street, City, State, Zip Code) 1580 Lawrence Road, Danville, CA 94506 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Johal, Sumer Business or Residence Address (Number and Street, City, State, Zip Code) 599 Timberleaf Court, Walnut Creek, CA 94598 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Prabhakar, Arati Business or Residence Address (Number and Street, City, State, Zip Code) c/o Pivotal Systems Corporation, 1580 Lawrence Road, Danville, CA 94506 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Conn, Robert Business or Residence Address (Number and Street, City, State, Zip Code) c/o Pivotal Systems Corporation, 1580 Lawrence Road, Danville, CA 94506 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) U.S. Venture Partners VIII, L.P. and affiliates Business or Residence Address (Number and Street, City, State, Zip Code) 2735 Sand Hill Road, Menlo Park, CA 94025 Check Box(es) that Apply: Beneficial Owner Executive Officer ☐ Director General and/or ☐ Promoter Managing Partner Full Name (Last name first, if individual) Enterprise Partners V, LP and affiliate Business or Residence Address (Number and Street, City, State, Zip Code) 2223 Avenida de la Playa, Suite 300, La Jolla, CA 92037-3218 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) ITU Ventures West I Business or Residence Address (Number and Street, City, State, Zip Code) 1900 Avenue of the Stars, Suite 2701, Los Angeles, CA 90067 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Chung, Sherk Business or Residence Address (Number and Street, City, State, Zip Code) 81 Lansing Street #310, San Francisco, CA 94105

		A. BASIC IDENTI	FICATION DATA						
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 									
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if i Venkatesh, Mukund	,		•						
Business or Residence Address (Number and Street, City, State, Zip Code) 2180 Fell Street, San Francisco, CA 94117									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if i	ndividual)								
Business or Residence Address 275 Via Naretto, Mo	•								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if i	ndividual)								
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if i	ndividual)								
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if i	ndividual)								
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)	-						

]	B. INFOR	MATION	ABOUT O	FFERING				 -	
1.										Yes	No			
Answer also in Appendix, Column 2, if filing under ULOE.								لسيا	_					
2. What is the minimum investment that will be accepted from any individual?														
										Vac	N.			
	Does the offering permit joint ownership of a single unit?								Yes ⊠	No				
;	commissi a person states, lis	ion or sin to be list at the nan	nilar ren ed is an ne of th	nuneration associate e broker o	n for solici d person o or dealer.	tation of p or agent of If more th	urchasers in a broker of nan five (5)	n connection r dealer reg	with sales istered with be listed ar	of securities the SEC an	or indirectles in the offer d/or with a state of the persons of	ing. If		
Full 1	Name (La		first, if i	ndividual)									
Busir	ness or R	esidence	Address	(Number	and Stree	t, City, Sta	te, Zip Cod	e)	<u></u>	. 100		······································		· ·
Name	e of Asso	ciated Br	oker or	Dealer						·				
State	s in Whic	ch Person	Listed 1	Has Solici	ited or Inte	ends to Sol	icit Purchas	ers						
													□ AI	l States
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Full	Name (La NO)		first, if i	ndividual)									
Busir	ness or R	esidence	Address	(Number	and Stree	t, City, Sta	te, Zip Cod	e)		-				
Name	e of Asso	ciated Br	oker or	Dealer										-
State	s in Whic	ch Person	Listed	Has Solici	ited or Inte	ends to Sol	icit Purchas	ers		· · · · ·				
(C	heck "All	l States"	or check	individua	al States).								☐ AI	1 States
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Full 1	Name (La		first, if i	ndividual)	- 1911/						-		
Busir	ness or R	esidence	Address	(Number	and Stree	t, City, Sta	te, Zip Cod	e)	, , , ,	*** *** ****				
Name	e of Asso	ciated Br	oker or	Dealer										
							icit Purchas							l States
(Check "All States" or check individual States)														
	_		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	_
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[R]	ւյ լՏ	C] [[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P R	-]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt \$0 Equity \$7,741,667.00 \$7,741,667.00 □ Preferred Convertible Securities (including warrants) \$0 Partnership Interests \$0 Other (Specify ___) \$0 \$0 Total \$7,741,667.00 \$7,741,667.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors Accredited Investors.... 10 \$7,741,667.00 O Non-accredited Investors..... \$0 \$0 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of Dollar Amount Security Sold Rule 505..... N/A Regulation A N/A Rule 504 N/A Total N/A Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$ Printing and Engraving Costs.... Legal Fees \$To Be Determined Accounting Fees. Engineering Fees Sales Commissions (specify finder's fees separately)..... Other Expenses (identify _____)..... \$ Total \$To Be

Determined

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND USE OF PROCEED	S
	b. Enter the difference between the aggregate offering price given in response Question I and total expenses furnished in response to Part C - Question 4.a. This difference "adjusted gross proceeds to the issuer."	æ is the	\$ 7,741,667.00
i.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to for each of the purposes shown. If the amount for any purpose is not known, furnish an e and check the box to the left of the estimate. The total of the payments listed must eq adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.	stimate	
		Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees	□ s	□ s
	Purchase of real estate		
	Purchase, rental or leasing and installation of machinery and equipment	□ \$	□ \$
	Construction or leasing of plant buildings and facilities	□ \$	□ s
	Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	s	□ s
	Repayment of indebtedness		□ \$
	Working capital	□ \$	⋈ \$7,741,667.00
	Other (specify):		
		□ \$	□ s
	Column Totals	□ \$	⋈ \$7,741,667.00
	Total Payments Listed (column totals added)		\$7,741,667.00
	D. FEDERAL SIGNATURE		
fol	e issuer has duly caused this notice to be signed by the undersigned duly authorized per- lowing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and staff, the information furnished by the issuer to any non-accredited investor pursuant to parag	t Exchange Commission.	ed under Rule 505, the upon written request of
	uer (Print or Type) rotal Systems Corporation	Date May 3 ,20	004
	me or Signer (Print or Type) seph R. Monkowski President		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)